



# Application for Building Permit

ACCESSORY STRUCTURES

Call Miss Utility before you dig: 1.800.282.8555

Permit# \_\_\_\_\_

## Job Site:

No. \_\_\_\_\_ Street \_\_\_\_\_ Suite \_\_\_\_\_  
Lot No. \_\_\_\_\_ Subdivision \_\_\_\_\_ Phase \_\_\_\_\_

## IDENTIFICATION:

Applicant: \_\_\_\_\_ Phone No. \_\_\_\_\_  
(Address) \_\_\_\_\_

Owner: \_\_\_\_\_ Phone No. \_\_\_\_\_  
(Address) \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone No. \_\_\_\_\_  
(Address) \_\_\_\_\_

License No. \_\_\_\_\_

Applicant for Permit shall be aware the subject property may be impacted by private Deed Restrictions, Bylaws and/or Covenants that are neither under the jurisdiction of nor enforceable by the Town of Camden. However, this does not relieve the property owner from the requirement to verify, confirm, and/or maintain compliance with recorded Deed Restrictions, Bylaws, and/or Covenants (which are enforceable through the Civil Court System) nor shall Camden's approval of this permit be construed to mean that the property is in compliance with applicable Restrictions.

I, the undersigned, own or act as agent for the owner of the above-referenced property.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

## DESCRIPTION OF PROPOSED CONSTRUCTION:

Total Cost of Improvement \$ \_\_\_\_\_

Shed

Stick Built \_\_\_\_\_ square feet

ZONE: \_\_\_\_\_

Pre-Fabricated \_\_\_\_\_ square feet

PROPOSED USE: \_\_\_\_\_

## Please describe the type of materials to be used:

Anchors \_\_\_\_\_

Hurricane Straps \_\_\_\_\_

Wood \_\_\_\_\_

Siding \_\_\_\_\_

Doors \_\_\_\_\_

Concrete \_\_\_\_\_

Deck \_\_\_\_\_ square feet

Wood  Composite  Other

Fence \_\_\_\_\_ linear feet

Wood  Vinyl  Chain Link  Other \_\_\_\_\_

- Swimming Pool \_\_\_\_\_ square feet  
 Above-ground       In-ground       Temporary Seasonal

Please describe the type of materials to be used:

- Liner \_\_\_\_\_  
 Filtration System \_\_\_\_\_  
 Electrical System \_\_\_\_\_

**NOTE: Electrical Application/Inspections are required through First State Inspections 1-800-468-7338 (in Delaware) or (302)856-3517 (outside Delaware)**

**TOWN OF CAMDEN REQUIREMENTS**

**CONTRACTORS:** The contractor of record as well as all sub-contractors shall acquire a Town of Camden Business License from the Finance Administrator. A current State of Delaware License and current Certificate of Liability shall also be required in addition to the license fee, payable via check, Visa, master Card, Discover Card, or Cash. (Applications may be found on the website, [www.Townofcamden.com](http://www.Townofcamden.com) or by visiting Town Hall.)

**NOTE: To avoid a cease and desist order, please ensure all contractors on site are licensed.**

**INSPECTIONS: 48 hour notification is required for all inspections, NO EXCEPTIONS.**

The following inspections are required:

- |   |                                      |
|---|--------------------------------------|
| <input type="checkbox"/> Footing  | <input type="checkbox"/> Electrical  |
| <input type="checkbox"/> Frame  | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Final  |                                      |
| <input type="checkbox"/> All other inspections as required by the Inspector |                                      |
| <input type="checkbox"/> (Fee & Application Required)                       |                                      |

**NOTE: All inspections are scheduled by the Land Use Department by calling 302.697.2299.**

**SCHEDULING REQUIREMENTS:**

- A request made for a.m./p.m. inspection shall be scheduled for the a.m./p.m. 48 hours after the request is made.
  - Cut off for calling in inspections requests is 3:30 p.m.
- Cancellation of Inspections
  - A cancelled inspection request must be received 24 hours prior to the scheduled inspection.
  - Rescheduling a cancelled inspection without 24 hour notice shall be re-scheduled following the above inspection process. A \$75 cancellation/re-inspection fee is required.
- Re-inspections
  - Failed inspections shall be re-scheduled following the above inspection process. A \$75 re-inspection fee is required prior to being placed on the schedule.

**FOR OFFICE USE ONLY:**

DATE RECEIVED: \_\_\_\_\_ PERMIT NO. \_\_\_\_\_  
 DATE ISSUED: \_\_\_\_\_ APPROVED: \_\_\_\_\_  
 DENIED: \_\_\_\_\_ REASON FOR DENIAL: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_